

FARMLAND DEVELOPMENT RIGHTS AGREEMENT TRANSFER REQUEST PROCEDURE

Please provide information requested below. Attach all required documentation and return to:

**FARMLAND PROGRAM
MDA-ESD
P.O. BOX 30449
LANSING, MI 48909**

IMPORTANT NOTICE: ALL APPROPRIATE ITEMS MUST BE COMPLETED. INCOMPLETE REQUESTS WILL BE RETURNED TO SENDER. PLEASE PRINT ALL INFORMATION.

1) AGREEMENT NUMBER (found in lower right hand corner of Agreement): -1231 (Don't know number?
STOP HERE. Obtain the Agreement number from the seller or a copy of Agreement from the Register of Deeds of the
county the land is located in).

2) NAME(S) as appears on current Agreement:

3) DID YOU PURCHASE (OR SELL) ALL OF THE LAND COVERED BY THE AGREEMENT?

YES – PROCEED TO LINE 4

NO / UNSURE – STOP HERE AND CALL THE FARMLAND PROGRAM OFFICE (517-373-3328) Transfers are possible ONLY IF ALL THE LAND COVERED BY THE AGREEMENT is conveyed to the new owner(s); if not all of the land is conveyed, you must obtain an approved split or release from your agreement (see Splitting Farmland Development Rights Agreements or releasing land).

4) NEW OWNER(S), as listed on the deed:

Individuals, **GO TO LINE 5.**

Other than individual(s), such as a partnership/LLC/Corporation/trust, **GO TO LINE 6.**

5) NEW OWNER(S) (Name exactly as appears on deed or land contract):

SSN:

SSN:

SSN:

SSN:

6) PARTNERSHIP/LLC/CORP/TRUST

a) Name of entity as it appears on deed or land contract:

b) Federal I.D. Number (if applicable):

c) List all Partners/Members/Officers/Trustees:

SSN:

SSN:

SSN:

SSN:

7) ADDRESS OF LANDOWNER **IF** different than on deed or land contract.

NAME	STREET ADDRESS OR P.O. BOX #	CITY	STATE	ZIP CODE
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8) ADDRESS of contact person to mail new Agreement and any subsequent correspondence to (if different than the new landowner):

NAME	STREET ADDRESS OR P.O. BOX #	CITY	STATE	ZIP CODE
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9) Was the land conveyed to you due to the death of a person named on current Agreement?

YES ☐ (Provide a copy of the DEATH CERTIFICATE to waive fee)

NO ☐ THERE IS A \$25.00 TRANSFER FEE PER AGREEMENT – Make check payable to: State Of Michigan

**REQUIRED DOCUMENTATION CHECKLIST
DO NOT SEND THIS REQUEST WITHOUT INCLUDING:**

- ☐ Farmland Development Rights Agreement number OR copy of current Agreement
- ☐ Copy of deed or land contract that shows ALL OF THE LAND covered by the Agreement was conveyed
- ☐ Copy of death certificate (if applicable)
- ☐ Check to State Of Michigan for transfer fees (if applicable)

REQUESTED BY: _____

DATE: _____

SIGNATURE (not required if e-mailed)

TYPED/PRINTED (required for any submission type)

**MAIL TO:
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MDA-ESD
P.O. BOX 30449
LANSING, MI 48909**

INCOMPLETE REQUESTS WILL BE RETURNED TO SENDER

VERSION 6.06